

Please type a plus sign (+) inside this box → ☐

PTO/SB/05 (3-01)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonapplications under 37 C.F.R. §1.53(b))

Attorney Docket No.

PC11724B

First Inventor

Zheng J. Li

Title

STABLE NON-DIHYDRATE AZITHROMYCIN ORAL  
SUSPENSIONS

Express Mail Label No.

EV 354211235 US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Mail Stop Patent Application  
Commissioner for Patents  
Box 1450  
Alexandria, VA 22313-1450

1. ☒ \*Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)
  2. ☐ Applicant claims small entity status  
See 37 CFR 1.27
  3. ☒ Specification [Total Pages (preferred arrangement set forth below)
    - Descriptive title of the Invention
    - Cross References to Related Applications
    - Statement Regarding Fed sponsored R&D
    - Reference to sequence listing, a table, or a computer program listing appendix
    - Background of the Invention
    - Brief Summary of the Invention
    - Brief Description of the Drawings (if filed)
    - Detailed Description
    - Claim(s)
    - Abstract of the Disclosure
  4. ☐ Drawing(s) (35 U.S.C. 113) [Total sheets   - 5. ☒ Oath or Declaration [Total pages   - a. ☐ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR §1.63(d))  
(for continuation/divisional with Box 18 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR  
1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76
7. ☐ CD-ROM or CD-R in duplicate, large table or computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a. ☐ Computer Readable Copy (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies)
    - ii. ☐ Paper
  - c. ☐ Statement verifying identity of above copies
9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☒ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other:
18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76.
- ☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP) of prior application No. 10/152,106
- Prior application information: Examiner            Group/Art Unit:

For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

## 18. CORRESPONDENCE ADDRESS

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(Insert Customer No. or Attach bar code label here)

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Name					
Address					
City			State		
Country			Telephone	Zip Code	Fax
NAME (Print/type)			Registration No. (Attorney/Agent)		
Signature			Date		
Scott Alexander McNeil			37,185		
			7/15/2003		

<b>FEE TRANSMITTAL</b>  <b>for FY 2003</b>		<b>Complete if Known</b>	
		Application Number	To Be Assigned
		Filing Date	Herewith
		First Named Inventor	Zheng J. Li
		Examiner Name	To Be Assigned
		Art Unit	To Be Assigned
		Attorney Docket No.	PC11724B
<input type="checkbox"/> Applicant claims small status. See 37 CFR 1.27			
Total Amount of Payment	(\$750.00)		

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																																																																																																																																																	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account:				<b>3. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge - late fee or oath</td> <td></td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge-late filing fee or cover sheet</td> <td></td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For filing a request for reexamination</td> <td></td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>1805</td> <td>1,840*</td> <td>1805</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>1252</td> <td>410</td> <td>2252</td> <td>205</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1253</td> <td>930</td> <td>2253</td> <td>465</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254</td> <td>1,450</td> <td>2254</td> <td>725</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255</td> <td>1,970</td> <td>2255</td> <td>985</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1401</td> <td>320</td> <td>2401</td> <td>160</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>1402</td> <td>320</td> <td>2402</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403</td> <td>280</td> <td>2403</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>1451</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55</td> <td>Petition to revive - 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The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																																																																																																																																																																																					
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SUBMITTED BY				Complete (if Applicable)	
Name (Printed/Type)	Scott Alexander McNeil			Reg. Number	37,185
Signature	<i>Scott Alexander McNeil</i>			Telephone	(860)686-1848
	Date	7/15/2003			

EXPRESS MAIL NO. EV354211235 US